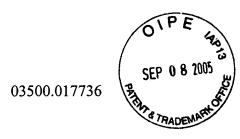
PTO/SB/17

Approved for use through 07/31/2006. OMB 0651-0032

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1	S		·		Complete if K	nown	
Fees pursuant to the Consolidated Proprietions Act. 2005 (H.R. 4818) FEE TRANSMITTAL		1 .	Application Number 10/720,2		10/720,215),215	
		\L F	Filing Date		November 25, 2003		
For FY 2005			First Named Inventor TOMOO A		TOMOO AKIZU	JKI ET AL.	
Applicant claims amall antity status. See 27 C.E.B. 1.27			- Examiner Name		Peter Lee		
Applicant claims small entity status. See 37 C.F.R. 1.27			Art Unit 2852				
TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. 03500.017736							
METHOD OF PAYMENT (check all that apply)							
Check	_	Money Order	None		her (please identi	· · - ·	
Deposit Account Deposit Account Number: 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments							
X Credit any overpayments of fee(s) under 37 C.F.R. 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SE	ARCH, AND EXAMINATION		H FEES	EV/	MINIATION EEE	e	
	FILING FEES Small Entity		Small Entity	EX-	AMINATION FEE. Small Entity	5	
Application Type	Fee (\$) Fee (\$)	Fee (\$)	Fee(\$)	Fee		Fees Paid (\$)	
Utility Design	300 150 200 100	500 100	250 50	20 13			
Plant	200 100	300	150	16			
Reissue	300 150	500	250	60	0 300		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Small Entity Fee(\$) Fee(\$) 25 25 20 100 360 180							
Total Claims	Extra Claims Fee (\$) <u>Fee Paid</u>	<u>(\$)</u>	<u>Multij</u>	ple Dependent Clai	<u>ms</u>	
12 - 20 or HP = 0 x 0 = 0 Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20						ee Paid (\$)	
Indep. Claims	Extra Claims F	ee(\$) F	ee Paid (\$)	_		0	
HP = highest number of	of independent claims paid	for, if greater that					
 APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). 							
Total Sheets	Extra Sheets	lumber of each add	itional 50 or fra	action ther	eof Fee (\$	<u>Fee Paid (\$)</u>	
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S)	4. OTHER FEE(S) Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)							
Other:							
SUBMITTED BY MILE							
Signature	1/00	V		ation No. ey/Agent)	30,110	Telephone 202-530-1010	
Name (Print/Type)	Lawrence A. Stahl			·-	·	Date: September 8, 2005	





PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Peter Lee
TOMOO AKIZUKI ET AL.)	
	:	Group Art Unit: 2852
Application No.: 10/720,215)	•
	:	Confirmation No.: 4982
Filed: November 25, 2003)	
	:	
For: FIXING APPARATUS, AND IMAGE)	September 8, 2005
FORMING APPARATUS	:	•

Mail Stop Amendment COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed June 16, 2005, Applicants submit the following amendments and remarks.